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May 8, 9, 10, 11*

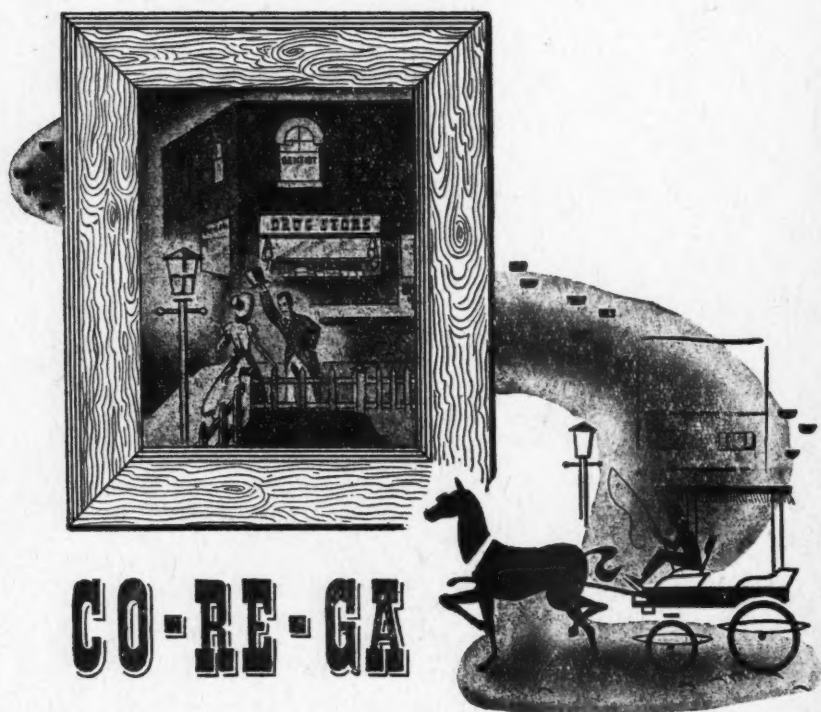
*The Fortnightly*  
**REVIEW**

**OF THE CHICAGO DENTAL SOCIETY**

*May 1, 1944*



*Volume 7 • Number 9*



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### Chicago Dental Society

# *The Fortnightly* **REVIEW**

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## **80th ANNUAL MEETING**

**Illinois State Dental Society  
Springfield, May 8-11, 1944**

# *The Fortnightly* REVIEW

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THE CHICAGO DENTAL SOCIETY

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## Governor Green to Address Illinois Dentists

80th Annual Meeting, Springfield, May 8, 9, 10, 11

Features of the 80th meeting of the Illinois Dental Society will be the talks of Governor Dwight Green and Captain C. Raymond Wells, President of the American Dental Association. Governor Green will be the speaker at the banquet Tuesday evening in the Abraham Lincoln Hotel. Captain Wells will discuss the important subject *Dentistry Faces The Future* at the Wednesday evening meeting. His theme will be the role of the American Dental Association in guiding the profession, the public, the state and federal government in matters pertaining to dentistry. Dr. Arne Romnes, Chairman of the Program Committee, emphasizes the significance of this subject for every dentist and points out the well known qualifications of the speaker to discuss this problem interestingly and with authority.

### TABLE CLINICS

An impressive array of table clinics will be presented on Wednesday morning under the direction of the clinic chairman, Dr. Herbert E. Weis. Some fifty clinics will cover all phases of dental practice. Wednesday morning is now being utilized for the clinic program instead of Thursday, the last day of the meeting, as was routine procedure for many years.

Two popular subjects handled by

capable men have been reserved for Thursday morning to maintain interest right up to adjournment. Dr. Carl O. Flagstad will describe his method for *Immediate Denture Service*, from diagnosis to delivery. He will use colored lantern slides and motion picture film to illustrate his lecture. *A Critical Analysis of Acrylic Resins Used for Denture Construction* is the title of the paper that will conclude the program. It will be given by Dr. Eugene W. Skinner, widely recognized authority in the field of dental materials.

On Tuesday afternoon Dr. Clarence O. Simpson will tell why *We Cannot Afford to Neglect Radiodontic Service* and on Wednesday afternoon, Dr. Roscoe Volland will discuss *The Making of Wax Patterns*, Dr. William H. Crawford, *A Survey of Twenty Amalgam Alloys*, and Dr. Kenneth W. Penhale, *Practical Procedures in Oral Surgery*.

President Frank Hurlstone and Secretary L. H. Jacob in extending an invitation to all Illinois dentists to attend remind them that because of the absence of a national convention this meeting is all the more important and that owing to the great number of members in the service an added responsibility for attendance is placed on all others. There are many present and postwar problems which can be solved best by an informed and united membership.



# Motion Picture Program Makes Big Hit

## Navy Films Both Entertaining and Instructive

The Red Lacquer Room of the Palmer House was filled nearly to capacity at the April monthly meeting of the Chicago Dental Society. The program was sponsored by the dental department of Great Lakes Naval Training Station and Captain J. A. Tartre, Senior Dental Officer, was in charge. Two silent and two sound films were thrown on the screen and they provided food for thought as well as some blood-chilling entertainment. This program fittingly climaxed a series of programs that has reflected great credit on Dr. B. D. Friedman and his Monthly Meeting Program Committee.

### ORAL SURGERY

The first film of the evening covered the field of oral surgery, including apicoectomies, alveolectomies, impactions, cysts and the removal of bony growths. Two methods of root resection are used in the Navy, one in which the root canal is filled and the root resected at the same sitting and one in which the root canal is filled first and the root canal resected at a subsequent sitting. These procedures, however, are not routine except for the officer personnel; time does not permit many such operations for enlisted men. Captain Tartre, in his comments, said that five thousand cysts had been discovered at Great Lakes, practically all of which were evident only through the X-ray examination. There are some fifty-five hundred men under treatment at this, the world's largest naval training station. Alveolectomies are performed in great numbers and the men undergoing this operation are hospitalized and put on a special diet. Obviously this operation is done very conservatively for all the patients are young men. Five weeks is the usual healing period and then the case is put through in five or six days. Captain

Tartre stated that it was the policy at the Training Station never to extract unerupted upper third molars at the time that the alveolectomies are done because of the danger of a "cave-in." The section of the film which dealt with the removal of cysts brought out some excellent photography as well as some clever operating. The last section showed the removal of a torus palatinus. The operator, after chiseling away the growth, used an acrylic splint (lined with something that looked suspiciously like Kelly's Paste) which he applied immediately, in lieu of stitches, with excellent results.

### DENTAL CRIPPLES

The second motion picture of the series was one which was produced experimentally and depicts, in three hundred feet of film, what is going on at Great Lakes. Captain Tartre expects that the finished product will be ready to show by next fall and hopes at that time to show it to the Society. Beginning with the dental examination of the recruit the audience was shown his progress, dentally, until his stay at the station was terminated. It was brought out that over three thousand recruits are examined in a day and that fifteen hundred of these are "dental cripples." Ten per cent of these require prothesis. One hundred and forty technicians are employed in the giant laboratory, most of whom were associated with some of the larger commercial laboratories in civilian life. These technicians put through over five thousand cases a month, half of which are partial dentures made with wrought iron clasps and costing, confidentially, but \$5.50 per . . . Skeletal fixation for fractures of the mandible next came in for consideration. This apparatus, according to the commentator, is useful in edentulous cases and



fractures at the angle where the posterior fragment has a tendency to ride up. It is especially indicated aboard ship where, in rough weather, there is considerable seasickness. Two sailors were pictured enjoying their first meal after the adaption of the splint and appeared to be managing very well.

#### THE ENEMY JAPAN

True to his promise Captain Tartre presented, as the program finale, a film that took the breath away: "The Enemy Japan." It was produced by the *March of Time* in cooperation with the Navy and is used in the training program. Former Ambassador Grew was the commentator and he particularly stressed one point: that in order to defeat Japan we must first understand her. The film was created with that thought in mind. Japanese, he pointed out, are a fanatical people determined to conquer the world. They think that Japan is the center of the universe and that their islands were plucked from Heaven. They are, therefore, a Heaven descended race destined to rule the earth. The land that makes up Japan proper is not as large as the state of California and yet the population is ten times greater. The people are essentially a seafaring race and all their great cities are seaports. In fact there are some twenty-eight thousand miles of coastline, and fishing is a vital industry.

#### RESOURCES

Every inch of arable land is made to produce food with rice as the principal crop. There are abundant natural resources including coal, copper, iron ore and sulphur. These deposits are so extensive that they furnish over one-half of the raw materials necessary for her tremendous war production. Japan has one of the best hydro-electric systems in the world and the country is dotted with power plants. Railroads were built with military needs in mind. In fact, since

the ascension of the war party to power, Japan's whole productive effort has been concentrated on preparation for war. Ambassador Grew then pointed out that the Japanese are prepared to wage war for a hundred years if necessary, and are, right now, stronger than at any time in history.

#### ATTITUDE

The Japanese peasant makes an excellent soldier, he continued, for he is used to hard work and squalor. Every bushel of grain that he raises is confiscated by the state which leaves him with nothing but his rice crop, and very little of that. He has been taught to hate the United States of America with an enduring hatred and to forget all about the millions of dollars that America poured into his country after the earthquake of 1923. The children are brought up in uniforms and even the very young are taught to use offensive weapons. They are taught to believe that the greater the odds the more glorious the death. They despise all other peoples, are murderers at heart and want only to make slaves of their enemies. They will not, he concluded, crack or surrender but—they can be beaten! This motion picture is one that every American, in and out of the armed services, should see. It is a truly remarkable film.

#### ELECTION OF OFFICERS

The annual election of officers was held during the meeting. Since there was but one candidate for each of the elective offices, the Secretary was instructed by President Kremer to cast a unanimous ballot. Joseph B. Zielinski was elected president-elect, Robert I. Humphrey, vice-president; Harry A. Hartley, secretary and James H. Keith, treasurer. These officers will be installed at the May meeting of the Society, Thursday, May 18.—James H. Keith.

# Evaluation of Acrylics in Operative Dentistry

KENNETH C. WASHBURN, B.S., D.D.S., Instructor, Department of Operative Dentistry, University of Illinois\*

Almost eight years ago a rubber chemist handed me a sample of synthetic resin called plexiglass. It was light in weight, clearer than glass; and as he explained, it had great impact resistance. That sample was intended for airplane windows.

He said, "Here is something that looks like good material to use in dentistry." That was during my student days; so I used it to make a cell model in my histology class. Two years later this same plastic, methyl-methacrylate, came on the market and has supplanted all other denture base materials.

Among the questions which arose were, "Why not use it for inlay restorations? We can add pigments and gain any color. Are its properties such that it will stand up under mouth conditions? It certainly has tissue tolerance." The only way to answer these questions honestly was to make inlays. Inlays were made, some 150 of them. The work was done at the University of Illinois College of Dentistry and I want to report the lessons learned.

## PHYSICAL PROPERTIES

We knew that we were working with a synthetic resinous substance with a Brinell hardness one-half that of pure gold, tensile strength comparable to pure gold, and one-half that of type B inlay gold; that it imbibes one-half of one per cent water when immersed for a few days; that its dimensional change when heated is marked because of the release of stress; that the material is tough and resists abrasion to an amazing extent on the same principle that a good tire tread resists abrasion; that its thermal conductivity is so low it could be used to prevent thermal shock; that its apparent ease of manipulation is

causing some men to be very enthusiastic; that it is resistant to acids; that the cold flow test was discouraging; that it is impervious to odors; that chewing gum sticks to it; and that its cost would be low.

## TECHNIQUE

We proceeded by making all classes of preparations and placing plastic inlays in them. I am still amazed when I see the color harmony which is obtainable with acrylic. This fact kept us at the work more than anything else. We first used the split flask, investing the wax model in rapid stone with margins covered and the surface to be blended left exposed. Tinfoil was used over the wax, and the upper half was run up in model plaster. The flask was separated and wax boiled out. Separating fluids of the various manufacturers were used and the polymer plasticized with monomer in proportions of 3 to 1. When it reached a gumlike consistency and was non-tacky, it was pressed into the mold, test packed with cellophane separator and finally cured by boiling one hour. Some of these inlays fit surprisingly well, and with practice the correct color became almost a certainty. (These inlays were cemented with Kryptex because it seemed to have durability and its color approaches that of the acrylic.) The greatest problem was the "flash" or excess material which was at the margin of the inlay. It was easy to destroy an inlay in removing this flash. To overcome this we used the copper plating method so that we would have something definite for the finishing. We obtained better margins, but the bronzing powder or graphite, whichever was used, was difficult to remove, it became incorporated in the inlay and discoloration was the result. Dr. LaMar Harris

\*Presented at the Midwinter Meeting of the Chicago Dental Society, February 1944.

flashes his copper plated dies with gold and eliminates this trouble.

In the injection mold method a wax sprue is attached to the inlay. The wax sprue is made the desired shape of the plunger. The lower half of the flask is run up in rapid stone, and then most of this wax is cut away. The lower half is lubricated and the upper half is run up in stone. The remaining wax is then boiled out. The separating media is again used in the mold and blown out with air. The taffylike mass of acrylic is placed in the mold in excess and pressed vigorously. If an excess is used test packing is not necessary. Finishing is usually a matter of grinding off the sprue and placing the inlay in hydrochloric acid for cleaning. However, that is usually not necessary because it comes clean as a rule. As the material cuts easily I find the finer cuttle-fish discs best for finishing. The final polish can be obtained after setting with wet whitening in a rubber cup. The inlays were set in Kryptex because it approached natural tooth color. Oxyphosphate of zinc cement was not used because its light opacity can be seen through the translucent plastic at the margin.

#### CAVITY PREPARATION

The cavity preparations were designed with same extension used for gold inlays with the exception of depth. I would make the preparation as deep as possible in order to gain bulk; this bulk is necessary for retention, giving greater surface area between parallel walls. Having a very low thermal conductivity there is no danger of causing thermal shock to the pulp, and I might add that in gingival inlay preparations a slight undercut was placed in the dentin with a No.  $\frac{1}{2}$  round bur. This undercut should be slight and rounded. The wax will draw over it and return somewhat to the shape of the cavity. When the copper plating method is employed Dietrich's elastic impression material may be used. Remember that undercut is very slight. The

finished inlay actually snaps to place because of the elasticity of the dentin and the plastic itself. I have been amazed at the way these seem to be drawn into the cavity and the difficulty there was in removing them prior to cementation.

#### RETENTION

I am certain that gingival acrylic inlays well retained between parallel walls will not pop out. Two surface acrylic inlays under the stress of mastication present a discouraging picture to those of us who are enthusiastic about the material. A large percentage of inlays placed in class II and class IV cavities were rather easily displaced. Recementation every few months was the rule. This displacement is due to dimensional change caused by the compression under biting force and the return to original shape when the pressure is released. This constant action caused a separation of the inlay from the cementation medium. The cavity surface of these displaced inlays revealed a tartar-like substance when examined under the magnifying glass and the greatest mass of the substance was at the margins which indicated that the loosening process was gradual. It is easy to imagine how a margin formed by a material as soft as methyl-methacrylate gives somewhat under a force approaching one hundred pounds. This flexion is sufficient to break the cement seal under the inlay for we know cement does not adhere to the plastic. There is cohesion but not adhesion. The gradual loosening process is the answer to some of the discoloration we observe about the margins of the plastic inlays. Food debris gradually finds its way between the cavo-surface angle of the tooth and the plastic. I have cleaned these discolored inlays off in hydrochloric acid and then dipped them in carbon-disulphide to have the discoloration return. In some cases the discoloration was general throughout the surface due to porosity.

## VENEER INLAYS

Since the results of tests on inlays under the stress of mastication was discouraging, the next question was can we veneer gold with the plastic to gain the strength of the metal and the esthetics of the resin? Inlays were made with prepared windows. These windows were undercut with round burs. Care was taken to have the window at least  $1\frac{1}{2}$  to 2 mm. deep to prevent the gold from showing through. The inlay was placed in the tooth and the window filled with wax to obtain the contour and margin. The waxed inlay was invested in the split flask and processed by the compression method. I have used this simple means of satisfying the most fastidious people who object to showing gold.

In view of recent developments in the field of dental plastics, it behooves chemists and clinicians in dentistry to scrutinize very carefully each and every new resinifying reaction. Thus will we expand plastics research in dentistry to gain a material which is harder, has greater dimensional stability and edge strength, with the color harmony obtainable with methyl-methacrylate. We should not be

discouraged. It was in 1932 that the broad principle of making methyl-methacrylate was discovered by an English company. In 1933 Dupont filed patent application and during this same year discovered the principle of compounding methyl-methacrylate polymer with its monomer as plasticizer. The use of plastics in dentistry is still new and we should not expect too much too soon.

## CONCLUSIONS

1. Acrylic inlays in class II and IV cavities were generally unsuccessful.
2. The stress of mastication can cause sufficient flexion in the plastic to break the cement seal.
3. Good results can be obtained in class V inlays where bulk can be obtained for retention.
4. Acrylic can be used with success in veneering gold to obtain the esthetics of the plastic and the strength of the metal.
5. The injection technique proved to be the most successful method of processing acrylic inlays.

# Industrial Dental Health—The Need and Approach

ERNEST GOLDHORN, D.D.S.\*

Joe Bloke always had bad teeth. Since early childhood he had been plagued by toothache and gumboils. They were accepted as sufferings that were natural and had to be tolerated. No one in those days heard of dental health; that sound teeth and clean mouth were necessary to maintain physical and mental fitness and a healthy body. Toothache drops and homemade poultices were the standard remedy for tooth troubles. Mouth cleanliness and dental care were luxuries meant for the other fellow.

Many of Joe's permanent teeth were taken for baby teeth and allowed to ache and rot. As he grew into manhood, most of his teeth were hopelessly broken down by decay, a matter of small concern to him.

Joe's first experience with a dentist came after he enlisted in the army at the outbreak of the first World War. Although crippled dentally, he was admitted to the Army, but before going overseas, an Army dentist filled or removed several teeth. In France, he suffered from an acute attack of "Trench Mouth" which improved after a time by the application of medicine and the use of a mouth wash.

At the end of the war, Joe returned home, got a job, married and settled down. He even bought a toothbrush and some toothpowder which he used occasionally. He also considered having some dental work done as his tooth troubles still persisted. He assured himself that next payday he would see a dentist, but his next paycheck would always have a mortgage against it; the Mrs. needed something more important or the installment on the car was due. Consequently, he and his family received little or no dental care, although his earnings were fairly good.

Then came the great depression of the

30's and Joe was forced to go on relief. His recurrent tooth troubles yielded eventually to aspirin or some other form of self medication. Rheumatic symptoms appeared periodically and these he relieved with aspirin or liniment.

Joe finally got off the W.P.A. and worked at various odd jobs doing fairly well, but never got around to secure much needed dental care. At times his rheumatic back troubled him considerably, but kidney pills or a porous plaster would give him temporary relief.

Then came World War II. His son enlisted in the Navy. Joe, too old to go to war, doing nonessential work, decided that it was his patriotic duty to enlist on the production front. There was a desperate need for men in the large war plants. He applied for a job and was given a thorough physical examination. There was a trace of albumin, blood pressure a bit high, some crepitus of the joints, teeth and gums bad. The doctor advised him to have his mouth X-rayed and have all infected teeth removed. He was hired, given special training, instructed in the fundamentals of industrial safety and made a fitter with a steel erection crew. The work was hard but interesting and vital to the war effort. After a day's work, he was thoroughly fatigued and his back painful, but he was back eager for more the next morning.

Though there were grumblings of pain and discomfort, he put off caring for his teeth, as the doctor advised, being too tired and too busy. Weeks had gone by, when one night intermittent neuralgic pains made him rather restless. At work the next day, he felt extremely fatigued and was forced to push himself. That night, wretchedly tired, recurring pain caused more sleeplessness. The next morning he dragged himself to work, aided by the usual pill and fought uphill

\*Presented at the Midwinter Meeting of the Chicago Dental Society, February 1944.



against toothache, fatigue, and work—then just before noon “it happened.” As the last plate was being fitted into its proper place, he seemed to swoon momentarily and the whole section let go. His partner’s ankle was broken, resulting in a two month time loss and Joe’s leg was badly lacerated, with contusions of the foot, although his toes were saved by safety shoes. Ten days of his time were lost. Material valued at several hundred dollars was damaged and production was delayed two days. There was an investigation and though Joe felt badly about the accident, he covered his own ineptitude and did not mention his dental sufferings and consequent fatigue that were the casual factors. His injuries were cared for at the plant infirmary and he returned to his job in due course of time.

After a few weeks, his employment was again interrupted by an acute flare-up of the old back condition. After a four day time loss, he reported at the infirmary to be returned to work. He received a thorough medical examination including radiographs of the back. Diagnosis—arthritic changes and spondylitis. Treatment—medication and physiotherapy. Etiology—focal infection. Dental radiographs and clinical examination revealed extensive pathology. All dental foci eliminated, patient responded to treatment and for the first time since childhood he emerged with a clean mouth, free from dental sepsis.

Joe Bloke’s dental ills had suddenly changed from matter of personal concern to a serious liability, not only to himself, to his fellow worker, to his employer, but to the nation’s economy and war effort.

Working at machines and on assembly lines of the production front, there are literally millions of other “poor Bokes,” who because of fear, indifference, ignorance, or procrastination and other possible factors, have received inadequate or no dental care and have failed to maintain or value any semblance of mouth hygiene and dental health, and as a result have mouths

that are septic incubators of infection.

With one-half of the population presently engaged in industry, of whom a large percentage have mouths harboring varying degrees of dental sepsis—the most prolific source of industrial ill health—the dental condition of the industrial worker, is the nation’s No. One industrial problem.

The National Industrial Conference Board reported a loss of 39,550,000 man-days to American industry during the month of August, 1943 alone, as a result of sickness, nonindustrial accidents and personal reasons. This staggering figure reveals the critical need of measures to raise the health level, and of more adequate health care for the industrial worker.

The manifold relationship of dental infection and ill health has been so voluminously reported in medical and dental literature, that any restatement or elaboration in this essay is unnecessary, other than to reaffirm the conclusion of many observers that a high level of dental health is paramount to the maintenance of a proportionate high level of general health and physical well being.

The deleterious effects of cumulative dental sepsis, insidiously undermining the health of a large percentage of industrial workers, cannot be fully evaluated in terms of manpower or manhour losses, but no worker can retain good health and efficiency, nor remain a safe worker, with a mouth harboring extensive dental infection.

The relationship of dental health and industrial safety, though intimate, has been virtually disregarded or overlooked by the industrial hygienist and the exponent of industrial safety. General debility, malaise, and fatigue due to dental infection and suffering, are intangibles yet to be considered seriously as casual factors of individual accidents.

Nervous disorders, mental aberrations and physical impairments, caused or aggravated by dental infections, are not only factors contributing to the cause of accidents and the reasons for “man-



failure," but share responsibility for production errors and material spoilage.

Military, naval and commercial aviation insist upon a high standard of dental health for operational personnel before entrusting costly equipment and the safety of others to their care, realizing the potential safety hazard of uncontrolled dental disorders. Industry, in general, unknowingly entrusts the safety of others, costly equipment, and material to unwitting "Dental Septics," who are constant liabilities to industrial safety and production.

Dental health should be as important to the crane operator, engineer, machine operator, and many other occupations, as it is to the pilot and co-pilot upon whom the safety of many others depends.

Dental programs in industry are not new, many having been in existence a score or more years. These programs were originated by the industries to improve and implement industrial health services and, in many instances, without the approval of local dental organizations or parent bodies. The programs were developed along the lines that management or the medical director thought they should be. Consequently, they varied greatly as to scope and objectives, and were looked upon by the profession with skepticism and sometimes scorn.

It was not until the war was upon us, when manpower problems, industrial ill health, absenteeism, etc., and the serious state of dental health of the younger men revealed by Army induction examinations, that organized dentistry became aware of the need for industrial dental programs.

The preconceived fears of some elements within the profession, that industrial dental programs may become an entering wedge for some form of socialized dental service, may be dispelled by the example of the development of modern industrial medicine, which today is no nearer socialization than at its emergence two or three decades ago and has the whole hearted support of organized medicine. The American Medical Association, through its Committee on In-

dustrial Health, is actively sponsoring industrial health programs and organizing excellent postgraduate courses in industrial medicine and surgery.

The establishment of the Council on Dental Health by the House of Delegates of the American Dental Association in August, 1942, for the study and solution of important dental problems and the creation within the council of an industrial committee, was the initial recognition of the dental health problem in industry and heralds the beginning of definite study and determination of basic principles for developing industrial programs.

In the development of dental programs for industry, the basic consideration is the justification and definite need of such services as essential to industrial health and the economic value of these services to industry. The program should be integrated in a well developed industrial health service, having the complete cooperation of industrial medicine, and should assume like responsibilities.

Strict emphasis should be placed on health service and the scope of the program limited to services essential to industrial health, efficiency, and safety. The primary objectives being, "to keep workers on the job," to reduce absenteeism, manpower and man-hour losses, to increase industrial efficiency, to improve industrial health and to enhance industrial safety.

The basic services essential to industrial health should include:

1. Complete diagnostic services: Clinical and radiographic.
2. Emergency dental care: Treatment of acute and painful dental lesions, toothache, neuralgias, abscesses, gingivitis, stomatitis, etc.
3. Occupational Diseases: The study, recognition and palliative treatment of oral manifestations of occupational diseases peculiar to certain industries.
4. Treatment and elimination of dental foci of infection.
5. Treatment of industrial injuries.
6. Dental health education.

In the planning and development of

dental programs for industry, the availability of dental personnel or manpower requires serious consideration. To provide dental services which the Army deems adequate, one dental officer is needed for five hundred men, leaving about one dentist to provide for the needs of three thousand civilians. It is obvious that any appreciable expansion of industrial services would, therefore, be limited and that large scale development must be deferred to the postwar period when returning dental corps men can be attracted to this type of practice.

Bunting in a recent article, "Planning for Postwar Dentistry," discussing dental health needs and dental manpower problems, concludes: "Minimum remedial operative procedures constitute the only type of dental health service which we can offer at the present time to the population as a whole. Complete dental service for all the people would be a colossal undertaking; one which, if attempted in its entirety, would stagger the imagination!" This sound and timely evaluation of the problem must be borne in mind in limiting the scope of programs of dental health care to a group that may include about one-half of the population.

The fundamental purpose and main objectives of industrial dental health service, "To keep men on the job, to reduce time loss and to increase industrial efficiency," will in themselves drastically curtail the extent of the service. All dental procedures less essential to industrial health, requiring numerous or prolonged sittings and removing the worker from his productive tasks, interrupt production and are decidedly non-economic.

In the mass production industries, capital investment in machinery and maintenance of production schedules will not permit any unnecessary absence of the worker from his appointed task. The modern industrial plant is geared to produce at maximum efficiency for as many hours as is expedient for maximum production, and any interruption increases costs. Therefore, the various

phases of dental care to be included in the program must be measured by their economic value.

Another important factor that will limit the scope of the service, particularly in the so-called heavy industries where plants are spread over wide areas, are the distances between places of employment and dental clinics, causing time loss which would obviate services requiring numerous sittings. One short dental sitting may mean a time loss of an hour or two, incurred by the worker's absence from productive tasks. This time and production loss is noneconomic and wholly unjustified to either employer or employee for a service that can be rendered in a short time during the worker's leisure hours.

The difficulty of maintaining an appointment schedule or of making definite appointments in an industrial clinic imposes limitations of services included in an industrial program. In the heavy or mass production industries, it is virtually impossible for a worker to leave an assembly line or a machine to keep an appointment at a stated time. The flood of emergency cases, demanding prompt attention, will disrupt any prearranged schedule, causing unavoidable delay and considerable time loss. The wider the scope of the services rendered, the more unwieldy and less efficient the service becomes; it is, therefore, apparent that only the services most essential to health and industrial effort be included in projected programs.

These factors are mentioned, to allay the fears expressed by some members of the profession, that industrial dentistry may invade the domain of private practice. On the contrary, a well administered program making vitally needed dental care limited to diagnosis, treatment of sepsis, emergency treatment and education available to the millions of workers, will greatly stimulate the demand for dental care.

Restorative dental procedures should be excluded from industrial dental health programs because of the various preceding factors stated. This definite and

fixed limitation qualifies the program primarily as a preventive and emergency dental health service.

Dentistry has made an enviable and sincere approach to the dental health problems of childhood through education and the development of school programs. The Victory Corps physical fitness program is a nationwide effort to elevate the dental health level of the high school youth who will serve in the armed forces or in industry in the near future. An industrial health program would be a proper sequence to the Victory Corps program and give the youth of the country a continuation of dental supervision and education as they are absorbed into industry. It would present dentistry with an opportunity to reach the largest single and most important economic group with dental education and supervision.

Industrial dental health programs coordinated with plans for providing essential dental care for the low income segment of the population, and prepayment plans now being considered by the Council on Dental Health would greatly lessen the current demand of extending dental care through compulsory insurance or by financial aid from public funds.

The industrial dental health services should be gratuitously extended to the workers as are the other industrial health and safety services. The cost to industry will be returned with dividends in increased production and lowered unit costs.

All programs functioning as part of an industrial health service must have the cooperation of local practitioners to achieve ultimate success. The younger worker usually presents himself with a toothache or an acute infection and after receiving emergency treatment is referred to a dentist of his own choice for further treatment. Simple operative procedures and prophylactic measures usually suffice to restore and maintain dental health.

The older worker who has had little dental care or mouth hygiene and who is ailing from the results of years of dental neglect is usually presented as a medical

case with focal infection or is suffering from advanced and hopelessly infected dental lesions. Dental roentgenograms invariably reveal extensive pathology and only heroic measures will restore a healthful oral condition. After all forms of dental sepsis have been eliminated, the services of the private practitioner are needed for oral reconstruction.

It is the worker, approaching middle life, with years of accumulated dental sepsis, showing definite signs of physical deterioration and symptoms of degenerative disease processes common to advancing age, that is likely to derive the greatest benefit from industrial dental health service. The usual decline in health for this age group comes at a time when their industrial usefulness is reaching its peak because of training and experience. If this period of highest productive efficiency can be extended well into advanced age by effective health measures, the economic value to industry, the worker, and to society would be incalculable and the cost of health services to industry, including dental, would be relatively insignificant.

The most necessary and important contribution that organized dentistry can make in developing dental health programs in industry is dental health education emanating from the Council on Dental Health of the American Dental Association.

All plans for dental health programs to provide critically needed dental health service to certain population groups such as industrial workers will be nullified to a large extent by the lack of or indifference to dental health education. Until the beneficiaries of all these efforts are educated in the fundamentals of dental health, are willing to accept dental care, practice strict mouth hygiene and observe certain dietary restrictions, the desired results of prevention and conservation cannot be attained.

A well directed dental health educational program having the cooperation and support of the industrial hygiene, safety and the public health agencies, is a prerequisite to any effort to expand

dental health services. It is not only the worker, who must be educated to become dental health conscious, but the management and the industrial hygienists must be awakened to possibilities of industrial dental health programs.

The enlistment of state and local dental bodies in a cooperative effort similar to the development of the Victory Corps program is essential to enlargement of industrial dental health plans. Surveys and studies of the need and related industrial health problems by duly appointed committees in their respective states and localities are necessary. With the cooperation of local dental groups in providing educational programs of mutual benefits the welfare of the worker and of the profession could be promoted. A commendable approach of the dental health problem and of dental health education in industry, one that has tremendous possibilities, is being undertaken by the Dental Hygiene Institute of Chicago. The institute has recently revived an industrial diagnostic service originally pioneered by the Chicago Dental Society. Educational programs consisting of dental health sound movies and slides followed by dental health talks are presented before industrial groups and the diagnostic service is made available to the workers at the place of employment. The clinical examination charts and roentgenograms are forwarded to the dentist of the worker's choice. By using portable equipment, the employes of the smallest industrial unit can be apprized of their dental health needs and started on the way to dental health. The project reaches many persons who have avoided dental care and who could not

have been contacted in any other manner.

The success of the Institute's service may be the solution of some aspects of the industrial dental health problem and deserves the wholehearted cooperation of all members of the profession. It merits serious consideration in the formulation of future plans.

Dental health education for industry can be disseminated on a vast scale through existing organizations and facilities. Movies, slide lectures and dental talks can be presented before safety meetings or at departmental gatherings. Many industries edit and print news sheets or other periodicals which seek for publication authentic articles pertaining to the health and welfare of the worker; these publications, avidly read by the workers and their families, enjoy a wide circulation. The National Safety Council maintains an elaborate poster service distributed to nearly all major industries and welcomes material pertinent to industrial safety. The Council also sponsors radio programs with nationwide reception and is eager to receive educational material having unusual safety value for broadcasting purposes.

Dentistry, as a public health profession, must assume the responsibility of formulating plans for providing more adequate dental care for all the people. In this endeavor, industrial dental health affords the profession a momentous opportunity to extend dental health care and education to a most important segment of the population, and in so doing contribute greatly to the war effort and to postwar industrial economy—11055 Michigan Ave., Chicago, Ill.



# EDITORIAL

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## A NATIONAL DIRECTORY OF DENTISTS NEEDED

The dental profession in the United States lacks a directory of its members. As a result numerous listings of dentists have and are being prepared as commercial enterprises.

One directory to which the Chicago Dental Society strenuously objected was known as "The Expert." It is no longer published, but its former publisher now is developing another listing under the name of Academy-International of Dentistry. In the original questionnaire sent to dentists to collect information for this publication, the statement was made that the data received would be available to the Surgeon General's Office, Washington, D. C. A letter from the Chicago Dental Society was sent to the Surgeon General of the Army asking if his office had requested such data and if it knew anything about the proposed Academy. The reply stated that the Surgeon General knew nothing of the project. The publisher has deleted this statement from the questionnaire.

There would be no need for special directories if the American Dental Association would provide a roster of its members. The members should be listed geographically and those whose practices are limited to specialties should be indicated. While such a directory would not list all of the dentists in the country, it would cover the great majority and would meet the need which has caused the development of other non-official compilations.

The task of making an official directory should not be great because many states publish annually a roster of their members. The expense of publishing could be met by the sale of the directory to those who desire it, if the financial success of some non-official listings is any indication. Perhaps the war will not permit an A.D.A. directory for the present, but plans can be made, and the project should be undertaken as soon as possible.

## STATE MEETING DESERVES ATTENDANCE

The officers and committee members of the Illinois State Dental Society responsible for the 80th Annual State Meeting are to be commended for the excellent program they have prepared. The program has balance and the speakers are of the highest caliber.

Those who attend will profit in two ways—by professional information and physical relaxation. The latter is being overlooked in these busy days by many in a profession dedicated to health improvement. The urge to serve as many of the population as is humanly possible is laudable; but now when the demand is so great it means long hours in confined quarters. The public must be served, but better treatment will be provided by dentists refreshed by periodic rest.

A characteristic of the State meeting is the unusual regularity of those who attend. Many Chicago dentists who never see each other during the year meet annually at the State conclave. These men appreciate the opportunities the meeting provides; more should become acquainted with its benefits.—*Robert G. Kesel.*

# TAS—A National Hook-Up

Martha Ann Mann

*The author is employed by the American Dental Association to index the dental literature. She is contributing a part of her unoccupied time to the service of the Travelers Aid Society. At our request she has prepared the following short story recounting some of the experiences and duties of the individuals donating time to this public service.*

It was a Sunday morning at the Service Men's Center when three anxious sailors approached the desk and asked if this was Travelers Aid. They had been four, it seemed, but their buddy had swallowed his bridgework the night before, and they had rushed him into a taxi, made for the nearest hospital and left him. Now, strangers in town, they had no idea at which hospital he had been deposited. Could the young lady help? The young lady could, and did. A few inquiries as to where the boys had been when the accident occurred, a check on hospitals in that vicinity and they were on their way, relieved and a little dazed. At the door one boy turned, grinned engagingly and exclaimed "Gee ma'am, you're wonderful!"

That sentiment expressed in words and ways as varied as the millions on the move through wartime Chicago is the Travelers Aid Society worker's D.S.C. The tearful gratitude of parents reunited with a ten year old runaway; the unsolicited contribution from an interested observer accompanied by "I've been watching you work. I'd like to help," provide that extra measure of satisfaction which atones for long and uncertain hours, and for an unflagging interest in people and their problems. The quick salute, the look of tension eased or anxiety allayed, and the appreciative "thanks for everything" often spoken on the run by men en route to every corner of the world, have, in the past year, kept some five hundred volunteers on duty ninety thousand hours in railway terminals, United Service Organization clubs, Service Men's Centers, and in the administrative office.

As a member agency of the USO,

Travelers Aid Society of Chicago is the official organization for handling problems of service personnel in transit. Established in 1914 as a nonsectarian society, and affiliated later with National TAS, it is the one group concerned exclusively with people on the move. Thirty years of experience with travelers of every race, creed and color have served it well in the stress of World War II, for in the twelve months just past forty times the service of prewar days has been asked and given. In the 237 cities and the thousand cooperating small towns where TAS is active, twenty-seven million people sought assistance in 1943.

Defense workers in mass migrations to new employment areas; adolescents unsettled by wartime conditions; civilians of every age needing travel assistance of whatever kind—from station to station transfer to notification of relatives at the journey's end; refugees both American and foreign, all present daily problems. And always there are the service man and woman, both our own and our allies, who have come by the hundreds, the thousands, and finally by the millions to the lighted globe of the TAS, and to the information desks and lounges bearing the sign of the USO.

Information posts are covered entirely by volunteers recruited through the Office of Civilian Defense and trained by Travelers Aid. With a minimum of one five hour assignment a week they are on duty from 8 a.m. until 11 p.m., seven days a week. Like the trained staff worker of TAS they are at the service of any who may seek their help. One girl was faced, early in her service, with the moving of a helplessly crippled arthritic patient from taxi to wheel chair to a



train already marked with standing room only. Three red caps and the train conductor helped achieve the seemingly impossible. A heart case desperately in need of a hotel room when there appeared to be no rooms available was the assignment of another. To a third appealed the lady lecturer, en route to an engagement, who had come to grief with two anterior jacket crowns. The worker supplied the dentist, who in turn supplied the porcelain jackets in what was considered record time.

At the information desk help in planning everything from a two hour stop-over to a furlough wedding complete with bridesmaids is routine business. City maps, street guides, information on transportation facilities, amusements and educational resources must always be in readiness. It is surprising how much ingenuity can be brought to play in locating a current address from an obsolete telephone number. Many visitors have never been in the city before, and like the young corporal en route from Tennessee to Idaho, have no idea of its size. Hopefully he asked direction to 110th Street, with only a half-hour between trains.

All TAS facilities act as a clearing house for messages. Meeting people, and missing them, is a major problem in a city where six railroad stations are an endless source of confusion. A train carrying troops scheduled for arrival at one station was suddenly rerouted into another. Dozens of people waiting at La Salle Street station were finally rounded up by TAS and directed to the Dearborn Station where the boys had been waiting for an hour of their all too precious time.

Housing is a week end nightmare. Hotel accommodations are requested by every income group from the big business man to whom the Blackstone offered no obstacle, and who settled for a room in St. Charles; to the nineteen year old seaman and his bride with \$20.00 for a three day honeymoon. TAS tries to help them all. Service Men's Centers offer sleeping room to many; first come,

first served, and information on hotel rates and availability is always on tap. In emergencies the workers themselves make countless calls. There are times when there appear to be no rooms in all Chicago, as a look into a USO lounge on Sunday morning will reveal. Even the floors are covered with men who sleep as only those in service can, on chairs, on couches, far too short for comfort; in layers on tiered baggage racks, though how they manage to do so must remain forever a military secret.

To the information and direction service the USO Lounge volunteer adds the duties of hostess. She contracts to awaken sleeping men in time for outbound trains; supplies stationery for the endless correspondence; sews on buttons and insignia, and listens to any who feel the need for talk. Here luggage is left thankfully for a few hours between trains, and since everyone seems to feel it safer if piled beside the worker's desk she often finds herself hemmed in by a veritable mountain of barracks bags, radios, cameras and gifts for home. A contingent passing through La Salle station one afternoon left it knee-deep in the blue drifts of coats and bags of the RAF. Another convoy, literally staggering in under full equipment, left their burdens and went off to enjoy the city's many facilities for service men. An hour before train time they came marching back, singing. "Boy, is this a town!" one lad remarked. "I've been in a helluva lotta burgs in this man's army, but Chicago—that's for me!"

As the war progresses whole new fields of service are arising. Already the relocation of the civilian population is beginning, and the returning service man and his need for readjustment to civilian life is coming more and more to the attention of TAS. Some, like the young soldier awaiting an ambulance at Northwestern Lounge, have a spirit which nothing can seem to break. Swathed in bandages to the waist, his arms held stiffly before him, he puffed endlessly on cigarettes which his two pals held to his

*(Continued on page 21)*

# NEWS AND ANNOUNCEMENTS

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## **FULL DENTURES SUBJECT FOR MAY MEETING**

The regular May meeting of the Chicago Dental Society will be held Thursday, May 18. While plans for the scientific program are not entirely complete, Dr. B. D. Friedman, Chairman of the Program Committee, states that the program being planned is one that will be of great interest and value. The subject will be "Full Denture Construction," and will be in the form of a demonstration symposium on the important techniques now in use.

The newly elected officers of the Society will be installed at this meeting and certificates will be presented to the retiring officers.

## **ENDORSEMENT POLICY FOR NEW MEMBERS MODIFIED**

An amendment has been proposed to change the by-laws of the Chicago Dental Society which would require all applications for membership to be endorsed by members practicing in the same territory or branch as the applicant. The Miscellaneous Business Committee of the Board of Directors to which this suggestion was referred reported to the Board that it did not believe the by-laws should be subjected to this amendment as too much tampering with the constitution of the Society would produce an instrument too complex to interpret and too difficult to enforce. However, the Committee did recommend that the Ethics Committee adopt a policy to attain this objective without an amendment to the by-laws. It suggested that the Committee hereafter return the application of those individuals about whom there is question for endorsement by members more immediate to the applicant's location. This change in policy will also permit the Committee on Ethics to request from any endorser full information about the applicant for whom he has vouched. The Board of Directors approved the

recommendation of the Miscellaneous Business Committee.

## **BRANCH MEETINGS TO BE HELD IN MAY**

The Englewood branch of the Chicago Dental Society will hold its next meeting at the Hayes Hotel on Tuesday evening, May 2. The evening will be devoted to table clinics. Dinner will be served at 6:30 and reservations may be made by calling Dr. John Lace, Pullman 4303.

Clinic Night for the Kenwood-Hyde Park branch will be staged at the Del Prado Hotel, Tuesday evening, May 2. A dozen or more table clinics will be given. Dinner will be served at 7 p.m. and immediately afterward a short memorial service will be held for Dr. Huston F. Methven.

On May 3 the Northwest branch will hold its annual Ladies' Night at the Midwest Athletic Club. Dinner reservations should be made with E. N. Johnsen, Humbolt 5815. The election of officers will be the only business of the evening.

## **MILITARY DEATHS IN 1943**

The death losses in military action for all belligerents in 1943 approximated 2,000,000 according to a recent release by the Metropolitan Life Insurance Company, New York. Last year was the second year in succession to show a death toll of 2,000,000 and the third year in which the scale was comparable to that of the first World War. There was estimated to be 27,000 Americans killed including deaths among the wounded and probable deaths of those listed as missing. This number is about double that of 1942 and shows a striking shift in the comparative losses between the Army and Navy. In 1942 the Navy had the most fatalities whereas in 1943 the Army battle fatalities doubled

# NEWS AND ANNOUNCEMENTS

those of the Navy. The German losses in 1943 exceeded any other year, the estimate being 850,000 with the possibility that the number reached more than 1,000,000. This is the first time their death rate exceeded Russian losses which for 1943 were about 600,000. Japanese deaths were estimated to be over 100,000 which is considerably less than the estimate for 1942. British Empire losses rose in 1943 to an estimated figure of 75,000 lives.

## CHICAGO DENTAL ASSISTANTS ASSOCIATION

The last meeting of this term will be held on Thursday, May 11, 1944. This will be a closed meeting, restricted to active members who have paid their 1943-1944 dues. The annual election and installation of new officers will take place during the evening.

Vera Henderson, chairman of the Nominating Committee, presents the following slate: Lola Berg, president-elect; Florence Sinclair, vice-president; Marcella Baer, treasurer; Mildred Cermak and Rosemary Henderson, board members for two year terms.

Remember the date—Thursday, May 11, 1944, at 8 p.m., Room 529 in the Pittsfield Building.

## FLUORINE ADDED TO DRINKING WATER

An experiment to determine the effectiveness of fluorine added to drinking water for the reduction of dental caries will be conducted under the auspices of the New York State and the Ontario Health Departments. It was announced recently that Newburgh, New York, which has a population of 3200 and Brantford, Ontario, having a similar population, will soon have one part of fluorine per million added to their water supplies. It is estimated that the

cost of this addition will amount to about \$1200 a year, and the experiment is to run ten years. The town of Kingston, New York, thirty-two miles from Newburgh, will serve as a control; there being no fluorine in the drinking water in that community and none will be added.

## MEDICAL CENTER SURVEY NEARING COMPLETION

A survey of more than 2200 parcels of privately owned property in the proposed medical center district on the West Side is nearing completion. This announcement was made at a meeting held March 16 by the commission which was named in 1941 by the State Legislature. The area under survey is bounded by Congress Street, Roosevelt Road, Ashland and Oakley Boulevards.

## TAS

*(Continued from page 19)*

lips. Finally he asked anxiously, "Say, Bill, did you remember to take care of the red cap?"

There are laughs as well as tears. What has become of the baby parrot carried lovingly by a WAC en route to basic training? And the husky young marine who red faced and awkward inquired direction to "the powder room." Sometimes the tables turn upon the worker. One volunteer spent a scorching forty-five minutes on a summer morning arranging a meeting for a deaf-mute father and his sailor son. All directions were carefully written and gratefully received by both the gentleman and his younger son who had wordlessly watched all proceedings. Imagine the worker's surprise when the boy finally exclaimed, "Thank you, very much."

As someone said not long ago, "Since I couldn't build a mouse trap, I joined the Travelers Aid, and does the world beat a path to my door!"

# NEWS OF THE BRANCHES

## KENWOOD-HYDE PARK

Our program chairman, Dr. Fred Gethro, is a human dynamo. Fred's enthusiasm is inspiring and one can always expect a first class program when he is at the helm. If your correspondent could prevail upon Doctor Fred to write the Kenwood news, I'll wager that he could outdo "Old Joe Bicuspid," the Montana scribe from Northsuburbia. Tuesday night, May 2 will be "Clinic Night" for Kenwood. The following table clinics will be presented: "Matrices for Amalgam Restorations," Dr. Jack Flanagan; "Acrylic Quick Repair," Dr. C. E. Waterman; "Oral Surgery," Dr. M. W. Case; "Orthodontia," Dr. G. L. Christopher; "Flap Operations in the Extracting of Teeth," Ralph Sappe; "Waxing for Partial Dentures," O. L. Mast; "Acrylic Jacket Crowns," Grover Schubert; "Suggestions for Better Operative Procedure," Fred W. Gethro; "Impression Technique," R. M. Morange; "Hints on Casting," Mr. Francis Moyer of the Thomas J. Dee Co.; "Securing Accurate One Piece Impressions with Zelex Modern Impression Material," Mr. Lynn Pratt of the L. D. Caulk Co.; "Anesthetic Solutions," Mr. Peter Eul of the Cook-Waite Laboratories; "Liquifying Acrylics for Acrylic Restorations," Mr. Henry Zimmerman of the Coralite Co. Clinics will also be presented by representatives of the Austenal & Coe Dental Laboratories. Dinner will be served promptly at 7 p.m. and immediately afterward a short memorial service will be held for our late president, Dr. Huston F. Methven. Mrs. Methven, wife of the late president, will be present for dinner and the service . . . Kenneth Smith and family recently received a welcome telegram from the War Department indicating that their son, Lt. Smith, a bombardier navigator in the Eighth Air Force, is a prisoner in Germany. Lt. Smith was first reported as missing in

action . . . Ensign Donald McKnight, son of A. E. McKnight, Mack the bard of Cromarty Firth, is a communications officer aboard an L.S.T. ship, which at present is in foreign waters . . . Mark Reardon is getting an early start with his Victory Garden . . . Remember that Tuesday evening, May 2, will be "Clinic Night" for Kenwood at the Del Prado Hotel. President Leo W. Kremer plans to attend the meeting to assist in the installation of the new officers.—*Howard E. Strange, Branch Correspondent.*

## NORTH SIDE

The recent downtown meeting was of unusual interest. The innovation of an entire program of moving pictures seemed to have the approval of everyone. Ben Friedman, chairman of the Program Committee, has done an excellent job the past season . . . Several North Siders will be active on the program of the annual meeting of the Illinois State Society at Springfield, May 8 to 11. Clyde West will represent the Chicago District of the Society on the State Executive Council; George R. Olfson is a member of the State Program Committee; Brad Brown is vice-chairman of the Clinic Committee and Ken Penhale will talk on "Practical Procedures In Oral Surgery." The following members will present table clinics: Paul H. Brown, W. G. F. Schmidt, Sophia N. Bolotny, Herbert C. Haberle, O. A. Helmer and Russell G. Boothe . . . Harold Hillenbrand, associate editor of the *Journal of The American Dental Association*, will be one of the speakers on the formal program of the Institute of Dental Health Economics, to be held at the University of Michigan, June 26-July 1 . . . Bernie Blomgren has received a call from the Navy to report to Bainbridge Naval Training Station, Maryland, on May 8 . . . Maj. M. G. Winograd, one of our former branch cor-



respondents, sends a card giving the new address of his hospital unit—160th General Hospital, c/o Postmaster, New York City, which means his unit is bound for overseas. Bon Voyage and good luck, boys! . . . Lee Simons was so impressed with life on an Arizona ranch last year that he is going back again to spend the month of May . . . Otto Silberhorn is making improvements on his summer place at Fox River Grove. This and his work at the university, to say nothing of his practice, keeps him on the hop . . . Floyd Adams has gone to Florida for a spring vacation . . . Bill Williams, just returned from Florida, has a beautiful coat of tan that should last all summer . . . August Swierczek is spending the first week of May at Grand Junction, Michigan, getting his garden into shape for planting . . . W. G. Burkhardt, after practicing in the Loop for thirty years, has moved his office to the near North Side, 2052 North Orleans Street . . . The Bowling Club finished the season April 12. *The Centrals*, consisting of Bill Corcoran, Joe Farrell and Walter Siewerth were in first place with 31 games won, 20 lost. In second place were *The Bicuspids*, R. B. Bell, Bill Young and Z. D. Ford, 28 games won, 23 lost. In the final two-ball sweepstakes, Al Young and Deacon Weber won top honors, while Bill Young and his son, Howard, were in second place. Following the afternoon's play we repaired to the Sheridan Plaza Hotel for a good steak dinner. Plans are being formulated for next season's play. Anyone wishing to join us should contact Dr. W. M. Young, Wellington 4411. Next season will open in mid-November . . . Don't think for a moment that Fred Barich was sincere in his comparison of man and woman. He was only baiting us. The facts are we seldom see an Apollo, while beautiful and glamorous women may be seen any day. As some one long ago said.

"They are pretty to walk with,

And witty to talk with

And pleasant too, to think on."

—Z. D. Ford, Branch Correspondent.

## NORTH SUBURBAN

At North Suburban's final meeting the following officers were elected unanimously to guide the destinies of the organization for the coming year: President, William Murray; Vice-President, Arthur Leaf; Secretary, James Pierce; Treasurer, Leland Johnson, and Director of the Chicago Dental Society, Edwin Baumann. As James Fonda relinquished the gavel to William Murray one could detect that it was not a new experience for Bill. He is a past president of the American Association of Orthodontists and also of the Chicago Association of Orthodontists. These past experiences will stand him in good stead as he pilots the good ship Northsuburbia through the turbulent waters of another war-torn year. As program chairman of the year just closed Bill gave us a series of speakers, the like of which was never exceeded during any similar span. This meeting was no exception because Lon Morrey of the American Dental Association talked to us about the trends of postwar dentistry. He stressed the inadequacies of the present set up and how the A.D.A., the dental schools, and the governmental, state, and municipal agencies could and would solve the dental-social problems of our great country. The big scare of socialized dentistry and its ruination of the profession was allayed when he spoke confidently about the close cooperation and collaboration of all the agencies concerned, governmental and otherwise. The problem will be met squarely and fairly with an end result that will meet the dental requirements of all our citizens. The national dental health program will be bigger and better in scope than it has ever been in all of our history. We, in dentistry, should turn away from fear and look toward the bright rays of hope which are bursting forth on all the dark horizons. We, of North Suburban, thank you Dr. Morrey for bringing the message to us at this propitious moment . . . Letters were received simultaneously from the McEwen brothers. Willard is in Jacksonville,

Florida, swabbing teeth for the Naval Gunners while Lorin is in the Aleutians bulldozing same for the Seabees . . . Doug Meinig is at Camp Crowder, Missouri, where routine dental duties are the order of the day . . . Pat Crowe returned from Florida with a nice coat of tan . . . Florida is beckoning to Jim Fonda who deserves a rest after a tough winter of gavel swinging . . . Winnetka's Community House will ring with Pete Mundell's silvery-tongued oratory when he speaks before the P.T.A. on a dental health subject April 19 . . . The second annual dental health survey at Evanston High School showed that 1884 students had returned their examination cards. Before the year is over, last year's record of 2395 will be exceeded. The records revealed that 64 per cent of the students had teeth in good condition against 54 per cent last year. The above testifies to the efficacy of this program, and shows further that Otto Brasmer did a fine job as usual . . . To Englewood's Webster Byrne: Now that you have conjectured on the possible environmental phases of my development, why not explore the hereditary factors? The combination might prove to be very interesting. Thanks for your kindly inference . . . The untimely passing of Stanley Clark was a shock to all of us. As friend, counsellor and true Christian gentleman, he stood at the top. With a smile and willing spirit he gave generously of his time and talents to a profession I know is grateful. We shall miss him. The officers and members of North Suburban extend their sympathies to his bereaved wife, close friends and relatives.—*Fredrick T. Barich, Branch Correspondent.*

#### NORTHWEST

A good turnout is expected on Ladies' Night which will be celebrated with a real party on Wednesday, May 3, at the Midwest Athletic Club, 6 North Hamlin Avenue. Dinner will be served at 7:30 p.m. Calls for reservations should be directed to our dinner chairman, E. N. Johnsen, at Humboldt 5815. Bring your

best girl and enjoy the program of entertainment being prepared for that evening. Election of officers is scheduled for the same meeting . . . A citation from the United States Treasury Department for "distinguished service to the War Finance Committee of Illinois" has been presented to Casimir Rogalski. The award was made in recognition of his work as chairman of the War Bond Committee of St. Constance parish, which group has purchased a total of \$120,000 in bonds and stamps to date . . . Bob Placek is resting at Hot Springs. At least he is resting until his wood clubs and golf glasses arrive—these two items having been left behind in the rush of departure . . . Gus Tilley played a round of "cow pasture pool" at Elmgate with his son-in-law, Lt. Gunn, who was home on a week end furlough from Camp Roberts, California . . . Congratulations to the following members who have received promotions in rank recently: Fred Nannestad and Corny Lewandowski answer to the title of captain, and Bruno Stwertnia and R. J. Walczyk have been promoted to lieutenant senior grade.—*Folmer Nymark, Branch Correspondent.*

#### WEST SIDE

The last meeting of the year was held at the Midwest Athletic Club on April 11. The following officers were installed for the ensuing year: President, George F. Vogt; Vice-President, H. E. Gillogly; Secretary, Louis Postilion; Treasurer, J. S. Vission; Librarian, F. J. Kropik and Branch Director, Leo J. Cahill . . . Jimmy Guerrero and Leo Cahill had a little difficulty in obtaining transportation home from Florida, but returned in time to be present for the meeting, each sporting a nice coat of tan. Don-Mammen of Northwest Branch was among the guests present. A vote of thanks goes to J. S. Vission for the excellent refreshments served after the meeting . . . Jack Gomberg was home on a furlough last week . . . Harold Epstein writes army life down in Louisiana is great . . .



Frank Kos has received his commission as a junior grade lieutenant, and is stationed at Great Lakes . . . Capt. Ben Krass, stationed somewhere in Italy, recently spent three days in a fox-hole . . . C. H. Stentz has received his orders and reports to Camp Perry on May 11 . . . William Ashworth and James Dillon were guests of Lt. Larry Faul at Great Lakes. They made a tour of the dental clinics and were greatly impressed by the new set-up . . . Sam Rakow is on the road to recovery after his recent auto accident . . . George Frost is preparing to move into his new office at Central and Lake on May 1.

Forward all news items to George Vogt, Kedzie 8167, who will write the next column.—*Walter Kelly, Assistant Branch Correspondent.*

#### WEST SUBURBAN

The Navy didn't stop entertaining West Suburban when a magician took over the stage at our final meeting for a large group made a pilgrimage to Great Lakes Wednesday, April 26, to see first hand the wonders of mass production that were described by the officers from the Prosthetic Department. Commander Gruenwald and Lt. Skupa were again gracious hosts. A great time was had by all. Among those who made the trip were: Paul Swanson, Joe Voita, Arno Brett, Jimmie Kohout, Rudolph Hinrichs, Joe Daly, Walter Wicklund, Ed Moore, Earl Crawshaw, Werner Gresens, Ralph Skudstad, and Dick Anderson . . . Lyle Filek came home on an emergency leave to pick up his family only to be foiled by a case of chicken pox inopportunely contracted by his daughter. The family will follow—minus the chicken pox . . . Don Zerwer and Kenneth Ladwig are up and around again after having spent two weeks in hospitals. Don still looks a little peaked, but is well on his way to recovery. Kelly Frakes "sat out" a week at Spring Mill, Indiana . . . Next stop—Springfield and the State Meeting. Just like the pilgrimage to Great Lakes a group of West Subur-

banites will travel together to the meeting, so make your plans now . . . This scribe is looking for a successor—where are you, welcome relief?—*Karl von der Heydt, Branch Correspondent.*

#### ENGLEWOOD NEWS

"Have you contributed to the Red Cross War Fund?" The Chicago Dental Society, being actively engaged in the current Chicago campaign, urges you to donate generously to this worthy cause. Englewood's Red Cross committee is headed by Milt Cruse, and consists of the following branch members selected by districts. J. R. Thompson, M. P. Brooks, O. E. Johnson, Ora Medsker, G. W. Solfronk, J. H. Hospers, L. E. Kalk, G. G. Knapp and H. C. Buttery. So come on fellows, let's all pull together and do our share; Give today! . . . The election of the new officers took place at Englewood's last meeting on April 11. Charles Coffey was chairman of the nominating committee and the following were chosen to set the course and destiny of our branch for the ensuing year; William Hillemeier, President; I. G. Oaf, Vice-President; J. L. Lace, Secretary; O. L. Medsker, Treasurer and T. C. Starshak, Director to the Chicago Dental Society. The installation of the above officers will take place at the next meeting on Tuesday, May 2, at the Hayes Hotel. Also we will be favored by an "all-Englewood clinic night," featuring a fair number of our home talent putting their stuff across in the various fields of dentistry. Clinics on full dentures, root canal therapy, periodontia and orthodontia are among the items to be presented. Jack Thompson is chairman of the show and promises us an interesting evening . . . Well Sir Spring must be just around the corner. At least we enthusiasts are considerably relieved by the optimism of Englewood's new golf committee. Commanded by chairman Ben Jostes who is assisted by John and Frank Hospers, Walter Laederach and A. F. Johnson, the committee has set the early part of June for the annual golf

(Continued on page 27)

# DIRECTORY CHICAGO DENTAL SOCIETY

Central Offices: 30 N. Michigan Ave., Chicago 2, Ill., Telephone State 7925

Kindly address all communications concerning business of the Society to the Central Offices.

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## Contributors

Manuscripts should be typewritten, double spaced, and the original copy should be submitted. Every effort will be made to return unused manuscripts, if request is made, but no responsibility can be accepted for failure to do so. Anonymous communications will receive no consideration whatever.

Manuscripts and news items of interest to the membership of the Society are solicited.

Forms close on the fifth and twentieth of each month. The early submission of material will insure more consideration for publication.

## Dental Hygiene Institute of Chicago

Josephine Bessems *Director*  
Room 1420, 30 N. Michigan Ave., Dearborn 9635

## Ethics Committee

Chester C. Blakeley, Chairman *1944*  
James J. Kohout *1945*  
Folmer Nymark *1946*

## Applications for Membership

The following applications have been received by the Ethics Committee. Any member having information relative to any of the applicants, which would affect their membership, should communicate in writing with Dr. Chester G. Blakeley, 7058 S. Euclid Avenue. Anonymous communications or telephone calls will receive no consideration.

## Active Members

Glick, Leo L. (U. of Ill. 1940) c/o Postmaster, New York. Endorsed by H. M. Marjerison and Margot Ulloa.  
Lauterstein, Aubrey (U. of Ill. 1943) West Side, 1819 Polk St. Endorsed by Maynard K. Hine and Robert G. Kesel.  
Pogirski, Henry H. (C.C.D.S. 1940) Station Hospital, Camp Polk, La. Endorsed by Edwin Brundage and Alexander N. Pera.  
Rowan, William A. (N.U.D.S. 1943) Kenwood-Hyde Park, 7637 Cornell Ave. Endorsed by William A. Rowan and Thomas F. Rowan.  
Walters, Walter J. (C.C.D.S. 1929), 1705 Washington Ave., Waco, Tex. Endorsed by R. W. McNulty and Warren Willman.

## NEWS OF THE BRANCHES

(Continued from page 25)

meet. Details will be forthcoming in the next issue of **THE REVIEW** . . . Englewood extends her deepest sympathy to the widow and relatives of Stanley W. Clark. A beloved member, teacher and scientist, his death is a distinct loss to dentistry . . . In the same vein we of Englewood wish to convey our condolence to our neighborly Kenwood-Hyde Park Branch in the loss of their President, Huston F. Methven . . . We offer our sympathy to F. G. Kuchler whose mother passed away recently . . . C. W. Wendelsdorf has been elected President of the Englewood Lions Club. Did you see Wendy's picture in the Southtown Economist amongst that bevy of WACS and WAVES? . . . Harold Hayes still has his Florida sun tan. While in Jack-

sonville, Harold visited Ted Lindholm, who after a number of months in service assumes he is pretty much of a dyed-in-the-wool "salt" of the Navy . . . Bud Hopkins expects to undergo a major operation soon . . . A trickle of news from away down in the Fiji Islands reveals that Ray Watkins of the Army Dental Corps expects to present a paper on "Vincent's Stomatitis in the Armed Forces" before an island dental convention. We understand there isn't any library on the Fiji's so Ray has to resort to pure memory for any references he may need in concocting his story. Who would have thought rationing and shortages (possibly of memory) would go so far? —R. C. Van Dam, Branch Correspondent.

### Classified Advertising

**Rates:** \$2.50 for 30 words with additional words at 3 cents each. Minimum charge is \$2.50. Charge for use of key numbers is 25 cents additional. Forms close on the 5th and 20th of each month. Place ad by mail or telephone to

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**For Sale:** CDX X-ray, General Electric wall type, Good condition. Automatic impactor, like new, and Crescent Wiggle Bug amalgamator. Call Dr. Kahn, Humboldt 1107 after 2 p.m.

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### WANTED

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**Wanted:** Association or location by dentist with wide experience. Address E-3, The Fortnightly Review of the Chicago Dental Society.

**Wanted:** Graduate pediatric nurse desires position in dental office. Three years hospital experience. References furnished. Loop preferred. Call Margaret Johnson, 605 Deming Place, at Diversey 1921 after 7 p.m.

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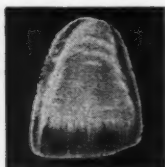
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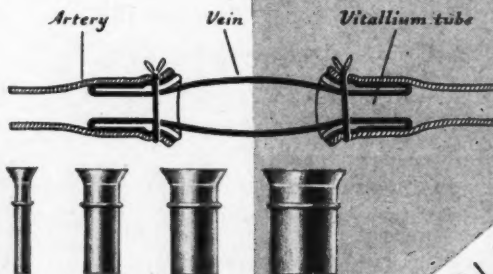
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"The Severed Primary Artery in the War Wounded," Blakemore, Arthur H., Lord, Jere W. and Stefko, Paul L. *Surgery*, 12:3. September 1942 "Restoration of Blood Flow in Damaged Arteries," Blakemore, Arthur H., Lord, Jere W. and Stefko, Paul L. *Annals of Surgery*, 117:4. April 1943.



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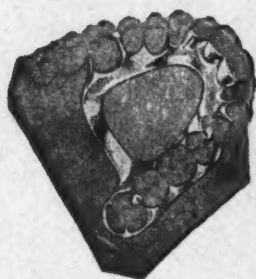


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